

Application for Special Zoning Permission

For City Staff Use Only

File No. _____
Date Filed _____
Appl. Review _____
PC Recom _____
CC Action _____

1. Applicant's Name(s) _____
Street/City/Zip _____
Phone # _____ Email or Fax # _____
Interest in Subject Property _____
2. Property Owner's Name(s) _____
Street/City/Zip _____
Phone # _____ Email or Fax # _____
3. Address of Subject Property _____
4. Please provide legal description of subject property or attach one to the application
Lot(s) _____
Block(s) _____
Addition _____
Parcel #(s) _____
5. The subject property is located at or on _____
_____ street(s), between _____
street and _____ street on the _____ side of the street.
6. The area (in sq. ft. or acres) of the subject property is _____
7. The present zoning of the subject property is _____
8. Type of community living arrangement (check one):
_____ Community-based Residential Facility
_____ Child Welfare Agency
_____ Group Home for Children
9. Proposed name of facility _____
10. Administrator's/Operator's Name _____
Phone # _____
11. Maximum number of residents requested as part of special zoning permission _____
12. Special needs or problems of the intended residents of this proposed facility _____

For Treasury Use #2422

13. Age range of residents: _____ to _____
14. Status of CLA license:
- _____ Not yet applied for
- _____ Pending
- _____ Issued license # _____
- _____ Date issued _____
- _____ Expiration date _____
15. Number of off-street parking spaces _____
16. The reasons why the proposed CLA should be located on the subject property _____
- _____
- _____
17. The existing use(s) of the subject property is (are) _____
- _____
- _____
18. The existing use(s) of adjacent property is (are):
- North _____
- East _____
- South _____
- West _____
19. The proposed time schedule for use of the subject property as described above is _____
- _____
20. I (we), the undersigned, do hereby make application and petition the City Council for special zoning permission as requested above, and in support of this application present the above facts concerning the proposed CLA and the immediate vicinity of the subject site.

Submitted this _____ day of _____, 20_____

Signatures _____

Note: Application filing fee is \$425 payable by check made out to the City of Eau Claire